FEC FORM 3X

FEGAND28

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee



				Offi	ce Use Only:
1. NAME OF COMMITTEE (in full)	E OR PRINT ♥	Example: If typin over the lines.	g, type2016 g	PERMINISHIC	3! 95PM 3: 15
WOITE Glimare	E. U.S. PAC	11111	<u> </u>	<u> </u>	
			<u>- 1 1 1 1 1 1 1 1 1 1 </u>	11111	
ADDRESS (number and street) 9219 Villa DVIVO					
Check if different than previously reported. (ACC)	Batherda		· · · · · · · · · · · · · · · · · · ·	nd 2	0817-
2. FEC IDENTIFICATION NUMBER V CITY A STATE A ZIP CODE A					
c 00551386	3. IS RE		iew V) or	AMENI (A)	DED
4. TYPE OF REPORT (I	Report	0 (M2)	May 20 (M5)	Aug 20 ((Ron-Election Year Only)
(a) Quarterly Reports:	Mar 2	0 (M3) J	un 20 (M6)	Sep 20 (Year Only)
April 15 Quarterly Report (Q1)	- Av.a.'	Primary (12P	lul 20 (M7)	Oct 20 (I General (12G	Pune# (19D)
July 15 Quarterly Report (Q2)	DRE-Flection	Convention (1. s.	Special (12S)	i ar
October 15 Quarterly Report (Q3)	•	<u></u>	* \$8* 	<u> </u>	in the
January 31 Year-End Report (YE)	Election			Security afti	State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (300	i ī	Runoff (30R)	Special (30S)
Termination Report (TER)	Election		B 7 B / Y	Technic teriors	in the State of
5. Covering Period 04 01 2016 through 06 30 016					
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.					
Type or Print Name of Treasurer Maya, Jul Signature of Treasurer Date Date					
Signature of Treasurer 7/10mg a, Hul Date 07 14 30 6					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.					
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